

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYSTEMS AND METHODS FOR MEASURING PULSE WAVE VELOCITY AND AUGMENTATION INDEX

<u>515125711</u>	O F E
described and	claimed in the specification:
Check one	MAY 0 1 2002 🛣
*a.	attached hereto.
b.	filed on as Application No and amended on (if applicable). reby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as
	PRADEMARK
I her	eby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as

amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

> James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; Richard E. Rice, Reg. No. 31,560; and Paul Tsou, Reg. No. 37,956.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

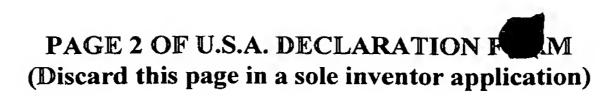
V -	Full Name Sole Inventor	Joseph	Stephen	ECKERLE
**Inventor's	Signature:	Given Name	Middle Initial	Family Name
**Date of Si		February	21	2002
		Month /	Day	Year
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	City		State or Province	Country
Citizenship:	U.S.			
	Post Office Address: (Insert complete	Star Route, Box 20		
	mailing address, including country)	Redwood City, California	94062	
*If Box (a) is c	hecked this form may be	executed only when attached to	the specification (including claims)	

If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

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^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.



	en Full Name			
of Second Joint	Inventor (if any)	John		MARLOW
2 **Invento	r's Signature:	a Patrick Mark	Middle Initial	Family Name
	Signature:	February	21	2002
		Month	Day	Year
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Citizenship:	U.S.			Country
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1 Typewritte	en Full Name			•
of Third Joint In				
•		Given Name	Middle Initial	Family Name
2 **Invento	r's Signature:			•
3 **Date of	Signature:			
		Month	Day	Year
Residence:				
		City	State or Province	Country
Citizenship:			·	
	Post Office Address: (Insert complete mailing address, including country)			
1 Typewritte of Fourth Joint 1	en Full Name Inventor (if any)			
		Given Name	Middle Initial	Family Name
2 **Invento	r's Signature:			
3 **Date of	Signature:		V	
		Month	Day	Year
Residence:				
		City	State or Province	Country
' Citizenship:				
	Post Office Address: (Insert complete mailing address,			
	including country)			
1 Typewritte of Fifth Joint Inv	en Full Name ventor (if any)			
-		Given Name	Middle Initial	Family Name
	r's Signature:			
3 **Date of	Signature:			
		Month	Day	Year
Residence:				
		City	State or Province	Country
Citizenship:				
A* - 1	Post Office Address:			
	(Insert complete	·		
	mailing address, including country)			

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.